

# BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

*01/09/1628*

### CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	<i>107</i>	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<i>107</i> minus 20 = *	<i>87</i>
INDEPENDENT CLAIMS	<i>7</i> minus 3 = *	<i>4</i>
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

SMALL ENTITY  
TYPE ☐

OR  
OTHER THAN  
SMALL ENTITY

RATE	FEE
BASIC FEE	355.00
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	FEE
BASIC FEE	710.00
X\$18=	<i>15100</i>
X80=	<i>1320</i>
+270=	
TOTAL	<i>2596</i>

\* If the difference in column 1 is less than zero, enter "0" in column 2

### CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

OR

RATE	ADDI- TIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDI- TIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

OR

RATE	ADDI- TIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDI- TIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

OR

RATE	ADDI- TIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

**NOTICE OF FILING / CLAIM FEE(S) DUE**  
**(CALCULATION SHEET)**

APPLICATION NUMBER: 01 684628

**Total Fee Calculation**

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101			355	710	=	716
Total Claims >20	203/103	101	-20 = 81	9	18	=	1546
Independent Claims >3	202/102	7	-3 = 4	40	80	=	320
Mult. Dep Claim Present	204/104			135	270	=	
Surcharge	205/105			65	130	=	130
English Translation	139						

**TOTAL FEE CALCULATION**

2726

Fees due upon filing the application:

Total Filing Fees Due = \$ 2726

Less Filing Fees Submitted - \$ 0

BALANCE DUE = \$ 2726

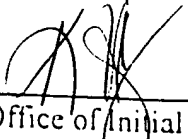
  
Office of Initial Patent Examination

Figure 7

**BEST AVAILABLE COPY**